

L11000034240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

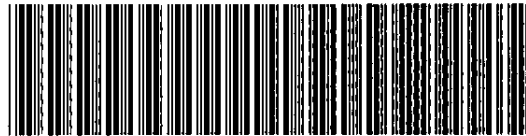
(Business Entity Name)

(Document Number)

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11 SEP 22 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 23 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Enterprise Entertainment LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Minelva Romero

Name of Person

The Warehouse Club

Firm/Company

841 SE 3rd Terr

Address

Cape Coral FL 33990

City/State and Zip Code

miniromero36@yahoo.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Minelva Romero

Name of Person

at (305) 989-9649

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Enterprise Entertainment LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/22/2011 and assigned Florida document number L11000034240.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

841 SE 35th TERR

CAPE CORAL FL 33900

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

N/A

If Changing Registered Agent, Signature of New Registered Agent

✓ If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

| Title | Name | Address | Type of Action |
|-------------|-------------------------|---|--|
| <u>MGRM</u> | <u>FERNANDO AROCHA</u> | <u>2608 BRIGHTSIDE CT.</u> <u>CAPE CORAL FL. 33991</u> | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| <u>mgrm</u> | <u>DANIEL G. ROMERO</u> | <u>841 SE 3RD TERR</u> <u>CAPE CORAL FL. 33990</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>mgrm</u> | <u>JUSTIN D. ROMERO</u> | <u>841 SE 3RD TERR</u> <u>CAPE CORAL FL 33990</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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 TALLAHASSEE, FLORIDA

Dated

Sept. 19, 2011

Minelva Romero, Owner

Signature of a member or authorized representative of a member

Minelva Romero, owner

Typed or printed name of signee